

# **PRINTER RUSE**

## **(PTO ASSISTANCE)**

Application : 09/960,148 Examiner : Charles Goodman GAU : 3724  
From: MR Location: IDC FMF FDC Date: 11-10-04  
Tracking #: 06020179 Week Date: 10-04-04

<b>DOC CODE</b>	<b>DOC DATE</b>	<b>MISCELLANEOUS</b>
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	05-27-04	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: ① Original claim 10 now 8 depends upon  
cancelled claim 3. See Cm pg. 5 dated 05-27-04.  
② Original claim 35 now 32 on Cm pg. 11  
dated 05-27-04 ends incomplete.  
Please resolve.

[XRUSH] RESPONSE: \_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
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NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04